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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/425,377 11/12/2002 *OK 10*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/06/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 16	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		
Verified and Acknowledged				

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## TITLE

Orientation system for a subsea well

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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